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## BIB DATA SHEET

CONFIRMATION NO. 9742

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10/534,324		429	1612	9516-086-999

**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

This application is a 371 of PCT/US03/11325 04/13/2003

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

UNITED STATES OF AMERICA 60424731 11/06/2002

**\*\* IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\***

04/18/2006

Foreign Priority claimed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Met after Allowance Initials	NJ	0	40

**ADDRESS**

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 UNITED STATES

**TITLE**

Methods of using and compositions comprising selective cytokine inhibitory drugs for the treatment and management of myeloproliferative diseases

<b>FILING FEE RECEIVED</b> 6240	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit